Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Document Page 1 of 32 Fill in this information to identify your case and this filing: Bonnie Lynn MacDonald Debtor 1 First Name Last Name Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Eastern District of Pennsylvania 24-10257-mdc Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: 531 S Warminster Road Creditors Who Have Claims Secured by Property. ■ Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the ■ Manufactured or mobile home entire property? portion you own? 1,018,441.78 1,018,441.78 Land ■ Investment property Hatboro PA 19040 Describe the nature of your ownership ☐ Timeshare State ZIP Code City interest (such as fee simple, tenancy by ☐ Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Montgomery Debtor 2 only County ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the ■ Manufactured or mobile home portion you own? entire property? Land Investment property Describe the nature of your ownership Timeshare interest (such as fee simple, tenancy by City State ZIP Code

(see instructions)

the entireties, or a life estate), if known.

☐ Check if this is community property

County

Debtor 1 and Debtor 2 only

■ At least one of the debtors and another

property identification number: _

Debtor 1 only Debtor 2 only

Who has an interest in the property? Check one.

What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home Creditors Who Have Claims Secured by Property. 1.3. Duplex or multi-unit building Street address, if available, or other description Current value of the Current value of the ☐ Condominium or cooperative entire property? portion you own? Manufactured or mobile home Land ■ Investment property Describe the nature of your ownership City State ZIP Code ☐ Timeshare interest (such as fee simple, tenancy by Other _ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 1.018.441.78 you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G. Executory Contracts and Unexpired Leases. 3 Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ✓ Yes Nissan Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.1. Make: the amount of any secured claims on Schedule D: Debtor 1 only Quest Creditors Who Have Claims Secured by Property. Model: Debtor 2 only 2015 Current value of the Year: Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? 62000 Approximate mileage: At least one of the debtors and another Other information: 10.362.00 10,362.00 ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Current value of the Current value of the Year: Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions)

Filed 02/27/24

Entered 02/27/24 15:43:42

Manager 1 Page 2 of 2 Jumber (#known) 24-10257-mdc

Doc 17

Case 24-10257-mdc

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Page 3 of 32 number (# known) 24-10257-mdc Macoocumbent Debtor 1 Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.3 Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: ☐ At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.4. Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **Ø** No Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: 41 the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: ☐ Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

.2.	Make:		Who has an interest in the property? Check one.
	Model:	Wall and the second sec	Debtor 1 only
	Voor:	**************************************	Debtor 2 only

Debtor 1 and Debtor 2 only

☐ Check if this is community property (see instructions)

At least one of the debtors and another

Current value of the Current value of the entire property? portion you own?

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here 10,362.00

Other information:

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Bonnie Lynn MacOcument Page 4 of 32 number (# known) 24-10257-mdc

Debtor 1

Describe Your Personal and Household Items

Do	you own or have any	legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured clair or exemptions.	ims
essi é	Household goods and	l furnishings	and the second s	
Ð.		nces, furniture, linens, china, kitchenware		
	□ No	nicos, idinicalo, inions, stillis, issuestantes		
	Yes. Describe	major appliances including refrigerator, freezer, trash compactor, ovens, washer and dryer, household furnishings, china and kitchen goods.	\$50,000.	.00
7.	collections;	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
	No Yes. Describe	laptop, desktop, iPad, iphone, printer	\$\$.00
8	Collectibles of value	Laboration de la constitución de		
•	Examples: Antiques an stamp, coin	nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; i, or baseball card collections; other collections, memorabilia, collectibles		
	No Yes. Describe	antiques: (2) desks, (3) corner cupboards, antique dolls and toys, antique German player, antique mirror	\$ <u>15,000</u>	.00
9.	Equipment for sports	and hobbies		
	and kayaks	otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes i; carpentry tools; musical instruments		
	Yes. Describe	baby grand piano	\$500	.00
1Ò	Firearms	Land William Programme And Committee		
		es, shotguns, ammunition, and related equipment		
	No.			
	Yes. Describe		\$	
	over the second		альных гороновической (
11	Clothes	olothes, furs, leather coats, designer wear, shoes, accessories		
	No Examples: Everyday o			
	Yes. Describe	everyday clothes, (1) fur coat, shoes, boots	\$15,000).00
12	. Jewelry			
	gold, silver	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	No Yes. Describe	(3) wedding bands, (1) engagement ring, iwatch, everyday/costume jewelry	\$\$).00
1;	Non-farm animals Examples: Dogs, cats			
	☐ No		1 000	
A Commence of the Commence of	Yes. Describe	(16) cats, (1) cockatiei, (17) builliles, (5) lefters, (2) fats	\$\$	<u>).00</u>
1	4. Any other personal a	and household items you did not already list, including any health aids you did not list		
Mary district	No No		makamani in aninin na ninga	
The second secon	Yes. Give specific information.		\$	
1	5. Add the dollar value	of all of your entries from Part 3, including any entries for pages you have attached	\$ 88,000	0.0
d Salahur radion	for Part 3. Write that	number here	→ · [

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Bonnie Lynn MacDocument Page 5 of 32 number (of known) 24-10257-mdc

Debtor 1 First Name

Describe Your Financial Assets

o you own or have ar	y legal or equitable interest.in a	ny of the following?		Current value portion you Do not deduct or exemptions	own? secured claim
6. Cash <i>Examples:</i> Money yo	u have in your wallet, in your hom	e, in a safe deposit box, and on hand when you file	our petition		
☑ No □ Yes			sh:	. \$	0.00
7 Deposits of money Examples: Checking and other	, savings, or other financial accou similar institutions. If you have m	nts; certificates of deposit; shares in credit unions, butiple accounts with the same institution, list each.	rokerage houses	5,	
☐ No ☑ Yes		Institution name:			
	17.1. Checking account:	Santander Bank		_ \$	9.61
	17.2. Checking account:			_ \$	
	17.3. Savings account:	Santander Bank			0.27
	17.4. Savings account:			_	
	17.5. Certificates of deposit:			_ \$	
	17.6. Other financial account:	Stride Bank		_ \$	7.0
	17.7. Other financial account:			.,	
	17.8. Other financial account:				
	17.9. Other financial account:			-	
	is, or publicly traded stocks	erage firms, money market accounts			
No No	35, myestment decoding war broke	orago ilimo, meno, mainer accessor			
Yes	Institution or issuer name:				
	Comcast (3) shares			\$	126.5
				\$	
				\$	
		rated and unincorporated businesses, including	an interest in		
an LLC, partnershi	p, and joint venture				
an LLC, partnershi	p, and joint venture Name of entity:	% C	of ownership:	'c	
an LLC, partnershi	p, and joint venture Name of entity: ic	% 	of ownership:		

 Case 24-10257-mdc
 Doc 17
 Filed 02/27/24
 Entered 02/27/24
 15:43:42
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 Page 6 of 32 number (# known)
 24-10257-mdc

Non-negotiable instrume	include personal chec ents are those you ca	ks, cashiers' checks, promissory notes, and money orders, not transfer to someone by signing or delivering them.	
✓ No Yes. Give specific information about	Issuer name:		\$
them			\$
	••••		\$
. Retirement or pension	accounts		
	RA, ERISA, Keogh, 4	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No			
Yes. List each account separately.	Type of account:	Institution name:	
	401/k) or eimilar plan		\$
			\$
	Pension plan:		\$
	IRA:		
	Retirement account:		\$
	Keogh:		\$
	Additional account:		\$
	Additional account:		\$
Your share of all unuse	prepayments	made so that you may continue service or use from a company	V
Your share of all unuse	prepayments		V
Your share of all unuse Examples: Agreements	prepayments	made so that you may continue service or use from a company	V
Your share of all unuse Examples: Agreements companies, or others	prepayments d deposits you have a swith landlords, prepa	made so that you may continue service or use from a company	
Your share of all unuse Examples: Agreements companies, or others No	prepayments d deposits you have to with landlords, prepa	nade so that you may continue service or use from a company lid rent, public utilities (electric, gas, water), telecommunications	\$
Your share of all unuse Examples: Agreements companies, or others No	prepayments d deposits you have it s with landlords, prepa	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications astitution name or individual:	\$\$
Your share of all unuse Examples: Agreements companies, or others No	prepayments d deposits you have it s with landlords, prepa In Electric: Gas: Heating oil:	made so that you may continue service or use from a company lid rent, public utilities (electric, gas, water), telecommunications estitution name or individual:	\$
Your share of all unuse Examples: Agreements companies, or others No	prepayments d deposits you have it s with landlords, prepa If Electric: Gas: Heating oil: Security deposit on re	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications astitution name or individual:	\$ \$ \$
Your share of all unuse Examples: Agreements companies, or others No	prepayments d deposits you have it s with landlords, prepail Electric: Gas: Heating oil: Security deposit on re Prepaid rent:	made so that you may continue service or use from a company lid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$\$
Your share of all unuse Examples: Agreements companies, or others No	prepayments d deposits you have to swith landlords, preparations and the second	made so that you may continue service or use from a company lid rent, public utilities (electric, gas, water), telecommunications estitution name or individual:	\$\$ \$\$ \$\$
Your share of all unuse Examples: Agreements companies, or others No	prepayments d deposits you have it s with landlords, preparations Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water:	made so that you may continue service or use from a company hid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unuse Examples: Agreements companies, or others No	prepayments d deposits you have it s with landlords, prepa If Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture:	made so that you may continue service or use from a company lid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unuse Examples: Agreements companies, or others No	prepayments d deposits you have it s with landlords, preparations Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water:	made so that you may continue service or use from a company hid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unuse Examples: Agreements companies, or others No Yes	prepayments d deposits you have to swith landlords, preparations and the same of the same	made so that you may continue service or use from a company lid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unuse Examples: Agreements companies, or others No Yes	prepayments d deposits you have to swith landlords, preparations and the same of the same	made so that you may continue service or use from a company hid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unuse Examples: Agreements companies, or others No Yes	prepayments d deposits you have it s with landlords, preparations Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual: ental unit: t of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$
Your share of all unuse Examples: Agreements companies, or others No Yes Yes 23. Annuities (A contract	prepayments d deposits you have it s with landlords, preparations Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual: ental unit: t of money to you, either for life or for a number of years)	\$
Examples: Agreements companies, or others No Yes	prepayments d deposits you have it s with landlords, preparations Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual: ental unit: t of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Bonnie Lynn MacDGHanent Page 7 of 32 number (# known) 24-10257-mdc

First Name Middle Name Last Name		
24. Interests in an education IRA, in an account in a qualified ABLE program, or unde 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	r a qualified state tuition program.	
☑ No		
Yes Institution name and description. Separately file the reco	ords of any interests 11 U.S.C. § 521(c)) :
institution hame and description. Separately life the rest		,
		\$
		\$
		\$
25. Trusts, equitable or future interests in property (other than anything listed in line	1), and rights or powers	
exercisable for your benefit		
No		
Yes. Give specific information about them		\$
Section for the section of the secti		
26. Patents, copyrights, trademarks, trade secrets, and other intellectual property		
Examples: Internet domain names, websites, proceeds from royalties and licensing agr	reements	
No		toring
Yes. Give specific information about them		s
Illioittiatioti about tiletti		
27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquo	r licenses, professional licenses	
☑ No		
Yes. Give specific		
information about them		\$
		Current value of the
Money or property owed to you?		portion you own?
		Do not deduct secured claims or exemptions.
28. Tax refunds owed to you		
☑ No		•
Yes. Give specific information about them, including whether	Federal:	\$
you already filed the returns	State:	\$
and the tax years	Local:	\$
29. Family support		
Examples: Past due or lump sum alimony, spousal support, child support, maintenance	e, divorce settlement, property settleme	ent
☑ No		
☐ Yes. Give specific information	Alimony:	\$
	Maintenance:	\$
	Support:	\$
	Divorce settlement:	\$
	Property settlement:	\$
	1 Topeny semement.	7
30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, Social Security benefits; unpaid loans you made to someone else	vacation pay, workers' compensation,	
☑ No		
Yes. Give specific information		s

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Bonnie Lynn Macountent Page 8 of 32 number (if known) 24-10257-mdc

			the continuity highway that the second continuity is the second decrease of the continuity and majority was the continuity because the forces	and the state of t
31.	Interests in insurance policies	nce health savings account (HSA)	; credit, homeowner's, or renter's insurance	
		ioo, nodini sayingo dosooni (i tori)	• • • • • • • • • • • • • • • • • • • 	
	☑ No☑ Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value			\$
				\$
				\$
				V
32	Any interest in property that is due you If you are the beneficiary of a living trust, property because someone has died.	a from someone who has died expect proceeds from a life insura	nce policy, or are currently entitled to receive	
	☑ No			1
	Yes. Give specific information			\$
33	Claims against third parties, whether of Examples: Accidents, employment disput	r not you have filed a lawsuit or es, insurance claims, or rights to s	made a demand for payment sue	
	Yes. Describe each claim	Automobile applicant 7/0	4/2023	100,000.00
		Automobile accident - 1/2	1/2023	\$
34	Other contingent and unliquidated clai to set off claims No	ms of every nature, including co	ounterclaims of the debtor and rights	
	Yes. Describe each claim			
	- 105, Bobonibo Quart victoria			\$
35	. Any financial assets you did not alread	ly list		
	☑ No			
	☐ Yes. Give specific information			\$
36	6. Add the dollar value of all of your entr	ies from Part 4, including any e	ntries for pages you have attached	100,143.47
	for Part 4. Write that number here		→	\$
				and a transfer region of a source of a consequence would be a facilities that the second or one of the source
F	art 5: Describe Any Business	Related Property You O	wn or Have an Interest In. List any r	eal estate in Part 1.
Ŀ	Describe Any Business	- Notation in operity i.e., o		
3	7 Do you own or have any legal or equit	able interest in any business-re	lated property?	
	No. Go to Part 6.			
	Yes. Go to line 38.			
d comments and the second				Current value of the
THE PARTY OF THE P				portion you own?
cuant years				Do not deduct secured claims or exemptions.
1000				A CONTRACT CONTRACTOR
3	8. Accounts receivable or commissions	you already earned		
	☑ No		and the second s	-1
	Yes. Describe			\$
de caprococh s etc				T
3	9. Office equipment, furnishings, and su	ipplies	attina a suma talanharan danka ahaira ahatrania dayiasa	e
and the same of the same	and the second s	are, modems, printers, copiers, fax ma	chines, rugs, telephones, desks, chairs, electronic devices	•
ALL PROPERTY.	☑ No			
color rudbuilded	Yes. Describe			\$
0.00	Application of the control of the co			and a

Macooument Page 9 of 32 number (# known) 24-10257-mdc Debtor 1 First Name 40 Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Z No Yes. Describe..... 41. Inventory ☑ No Yes. Describe.... 42 Interests in partnerships or joint ventures ☑ No Yes. Describe Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ☐ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes, Describe...... 44 Any business-related property you did not already list ☑ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish MO No Yes

Filed 02/27/24

Entered 02/27/24 15:43:42

Case 24-10257-mdc Doc 17

Document Page 10 of 32

Fill in this in	formation to ide	entify your case:		
Debtor 1	Bonnie	Lynn	MacDonald	
D00001	First Name	Mkidle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the:Eastern District o	of Pennsylvania	
Case number	24-10257-m	dc		
(If known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	ning federal exemptions. 11 U y you list on Schedule A/B tl		pt, fill in the information below.	
Brief description	on of the property and line on hat lists this property		Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	Home	\$ <u>1,018,441.78</u>	\$ 100% of fair market value, up to	
Line from Schedule A/B:	2		any applicable statutory limit	
Brief description:	Vehicle	\$ <u>10,362.00</u>	\$ 100% of fair market value, up to	
Line from Schedule A/B:	5		any applicable statutory limit	
Brief description:	Personal & Household	\$88,000.00	\$ 100% of fair market value, up to	
Line from Schedule A/B:	15		any applicable statutory limit	
	ng a homestead exemption o	of more than \$189,0501	es filed on or after the date of adjustment.	.

Document Page 11 of 32
MacDonald Page 11 of 32

Debtor 1

Bonnie First Name

Lynn

Case number (if known) 24-10257-mdc

Additional Page

	on of the property and line /B that lists this property	Current value of the portion you own		Amount of the exemption you claim	Specific laws that allow exemption
			the value from edule A/B	Check only one box for each exemption	
Brief description:	Financial assets	\$	100,143.47		
Line from Schedule A/B:	36			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	·	<u> </u>	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:				- \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		\$ 100% of fair market value, up to	
ine from Schedule A/B:				any applicable statutory limit	
Brief description:		\$		□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:				any applicable statutory limit	
Brief description:		\$		□ \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		Q \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:				any applicable statutory limit	
Brief description:		\$			
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		\$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:				any applicable statutory limit	
Brief description:		\$		<u> </u>	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Document Page 12 of 32

Fill in this ir	Fill in this information to identify your case:				
Debtor 1	Bonnie	Lynn	MacDonald		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court	for the: Eastern District of	f Pennsylvania	\mathbf{Y}	
Case number	24-10257-	mdc			
(If known)					

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

additional pages, write your name and cas	e number (if known).			
Yes. Fill in all of the information below.	y your property? In to the court with your other schedules. You have nothi	ng else to report on th	nis form.	
Part 1: List All Secured Claims				
for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Citigroup Mortgage (SPS Servicir	Describe the property that secures the claim:	\$1,018,441.78	\$ 487,040.43	\$
Creditor's Name 3217 S. Decker Lake Drive Number Street	my home			
Salt Lake City, UT 84119 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	_		
community debt Date debt was incurred 01/03/2007	Last 4 digits of account number 1 2 6 3			
2.2 Santander Consumer USA	Describe the property that secures the claim:	\$ 20,154.90	\$ <u>10,362.00</u>	\$
Creditor's Name 3000 Kellway Drive Number Street	2015 Nissan Quest			
Suite 120 Carrollton TX 75006 City State ZIP Code	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			

1,038,596.68

☐ Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number 6 2 5 6

Judgment lien from a lawsuit

Add the dollar value of your entries in Column A on this page. Write that number here:

Other (including a right to offset)

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Date debt was incurred 11/28/2023

Check if this claim relates to a community debt

Entered 02/27/24 15:43:42 Case 24-10257-mdc Doc 17 Filed 02/27/24

Document

Desc Main

Debtor 1

Bonnie First Name

MacDonald

Last Name

Page 13 of 32

Case number (if known) 24-10257-mdc

Column A Column B Column C **Additional Page** Value of collateral Unsecured **Amount of claim** Part 1: After listing any entries on this page, number them beginning with 2.3, followed that supports this portion Do not deduct the by 2.4, and so forth. claim value of collateral. If any Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) ☐ Check if this claim relates to a community debt Last 4 digits of account number Date debt was incurred Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated ZIP Code ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Last 4 digits of account number Date debt was incurred _ Describe the property that secures the claim: Creditor's Name As of the date you file, the claim is: Check all that apply. Contingent State ZIP Code Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) ☐ Check if this claim relates to a community debt Last 4 digits of account number Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

Debtor 1

Bonnie

Document MacDonald Page 14 of 32

Case number (if known) 24-10257-mdc

		Motified for a Debt		
agency is try	/ing to collect from y ore than one creditor	ou for a debt you owe to s	someone else, list the	a debt that you already listed in Part 1. For example, if a collection e creditor in Part 1, and then list the collection agency here. Similarly, if ist the additional creditors here. If you do not have additional persons to
				On which line in Part 1 did you enter the creditor?
 Name				Last 4 digits of account number
Number	Street			
				-
City		State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
				-
Number	Street			
				- 1
City	AVAILABLE TO THE STATE OF THE S	State	ZIP Code	-
City				
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street		- COMMITTEE	
Number	oucot			
•		100 Mark		
City	Augusta Andrea .	State	ZIP Code	_
The Contract of the P (1915) The P (1915) The Contract of the P (1915)				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number 1 2 6 3
Name				
Number	Street			_
				<u>_</u>
City		State	ZIP Code	
		CORDE RESIDENCE PECE SECURIO PER SECUENCIA DE PROPERTI DE RESIDENCE DE LA COMPUNE DE LOS COMPONIDOS DE PROPERTI DE PROPERTIDITATION DE PROPERT		On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
	Wanning - Wannin	and the second s		
			710.0-1	
City		State **********************************	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name		Walter and		Last 4 digits of account number
	Ol			_
Number	Street			
			Allow .	_
City		State	ZIP Code	_
City		State	ZII 0000	

Fill in this information to identify your case: MacDonald Bonnie Lynn Debtor 1 Last Name Debtor 2 Last Name (Spouse, if filing) First Name United States Bankruptcy Court for the: Eastern District of Pennsylvania ☐ Check if this is an Case number 24-10257-mdc amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Nonpriority Total claim Priority amount amount 2.1 Last 4 digits of account number _ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other. Specify ☐ No ☐ Yes Last 4 digits of account number ___ _ _ _ \$ ____\$ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt

intoxicated

Other. Specify

☐ No☐ Yes

Is the claim subject to offset?

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Page 16 of 32 2 umber (if known) 24-10257-mdc Desc Main

r listing any entries on this page, number them	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriori amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
•	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
City Clair 21 Code	☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	D. B. Walfe annual ablituding			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
	 Claims for death or personal injury while you were intoxicated 			
☐ Check if this claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
☐ No ☐ Yes				
gave manufacture en directerio della conseguia della surfacciona proprio di una successiva proprio manufacti di proprio della successiva proprio d	Last 4 digits of account number	\$	\$. \$
Priority Creditor's Name	100 4b - dak4!			
Number Street	When was the debt incurred?			
Numbel Jueat	As of the date you file, the claim is: Check all that apply	,		
	Contingent			
City State ZIP Code	Unliquidated			
Oily State En Oute	☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another				
☐ Check if this claim is for a community debt	 ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify 			
Is the claim subject to offset?	-			
□ No				
Yes			¢	\$
Priority Creditor's Name	Last 4 digits of account number	\$	⊅	
I HOLLY CHOUNCE O TRAINS	When was the debt incurred?			
Number Street	AAlien was the dept incolled:			
	As of the date you file, the claim is: Check all that apply	<i>I</i> .		
	• 			
	Contingent			
City State ZIP Code	Unliquidated			
INC. Language Ada at the At-the Observation	☐ Disputed			
Who incurred the debt? Check one.	Turn of PRIORITY and a second alaims			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?				
☐ No ☐ Yes				
LI YES		anna distancia menerale di Salata di Amerikana dan dan menerale di Salata dan dan dan dan dan dan dan dan dan d	THE CASE OF THE PROPERTY AND ADDRESS OF THE PARTY OF THE	ner er en strette statet til film er en er

Case 24-	10257-mdc	Doc 17	' . Filed 02/27	/24 Entered 02/27/24 15:43:42 Desc Main	
Bonnie	Lynn		MacDonald _t	Page 17 6 s 3 2 umber (if known) 24-10257-mdc	_
First Name	Middle Name	Last Name	Doddinent	rage ir or oz	

Га	List All Of Tour Horr Horr Tourisecul	reu Olamia	1
3.	Do any creditors have nonpriority unsecured claims	s against you?	
	☑ No. You have nothing to report in this part. Submit t		
	Yes	and term to the sourt with your other contours.	
4. 1	List all of your nonpriority unsecured claims in the a	alphabetical order of the creditor who holds each claim. If a creditor has	more than one
	nonpriority unsecured claim, list the creditor separately included in Bart 1. If more than one creditor holds a part	for each claim. For each claim listed, identify what type of claim it is. Do not ticular claim, list the other creditors in Part 3.If you have more than three nor	nst claims already
	claims fill out the Continuation Page of Part 2.	diction claim, list the other cleditors in rail 3.11 you have more than timee nor	ipriority unscoured
			Total claim
4.1		Last 4 digits of account number	
	Nonpriority Creditor's Name	Last 4 digits of account number	\$
	,	When was the debt incurred?	
	Number Street	and the state of t	
	114111257		
	City State ZIP	Code As of the date you file, the claim is: Check all that apply.	
	110 - 1 1 (b - 1 - 1 - 1 - 0 - 0 - 1	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	THE CHANGE PROPERTY AND A SECTION	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	Yes		
4.2		Last 4 digits of account number	\$
4.2	- Waltimorte - Wal	When was the debt incurred?	<u> </u>
	Nonpriority Creditor's Name	When was the dept moured?	
	and the second s		
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP	0.1	
	City State 211	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
İ	Debtor 1 only	☐ Disputed	
	Debtor 2 only	The state of the s	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
		Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	Yes		
4.3			
4.3		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
1	Number Street		
	City State ZIP	As of the date you file, the claim is: Check all that apply.	
	City State Zi	☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
:	Debtor 1 only	Disputed	
	Debtor 2 only	□ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
***************************************	At least one of the debtors and another	••	
		Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	□ No		
	☐ Yes	Other. Specify	
	·		

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginnir	ng with 4.4, followed by 4.5, and so forth.
	Last 4 digits of account number
Nonpriority Creditor's Name	When was the debt incurred?
Number Street	As of the date you file, the claim is: Check all that apply.
City State ZIP Code	Contingent Unliquidated
Who incurred the debt? Check one.	Disputed
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts
Is the claim subject to offset? ☐ No	Other. Specify
☐ Yes	
	Last 4 digits of account number \$
Nonpriority Creditor's Name	When was the debt incurred?
Number Street	As of the date you file, the claim is: Check all that apply.
City State ZIP Code	Contingent Unliquidated
Who incurred the debt? Check one.	Disputed
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that
☐ Check if this claim is for a community debt	you did not report as priority claims
is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify
☐ No ☐ Yes	
Residence in common count is a management are not such asset of the COUNTY and the county countries are asset as a such asset as a countries and the countries are a such as a s	Last 4 digits of account number
Nonpriority Creditor's Name	When was the debt incurred?
Number Street	As of the date you file, the claim is: Check all that apply.
City State ZIP Code	Contingent Unliquidated
Who incurred the debt? Check one.	☐ Disputed
☐ Debtor 1 only☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:
Debtor 1 and Debtor 2 only	Student loans
At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
Is the claim subject to offset? ☐ No	Other. Specify
☐ No☐ Yes	

Part 3:

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15;43:42 Desc Main Bonnie Lynn MacDonald Page 19 6 2 umber (# known) 24-10257-mdc Last Name Last Name

List Others to Be Notified About a Debt That You Already Listed

			On which entry in Part 1 or Part 2 did you list the original creditor?
lame	YNYMAN ESA A MEGANASA AND AND AND AND AND AND AND AND AND AN		
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street		☐ Part 2: Creditors with Nonpriority Unsecured Clai
			Last 4 digits of account number
City		te ZIP Code	
lame			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street		☐ Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account number
City	Ste	ite ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
lame	and described and the second s		
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street		Part 2: Creditors with Nonpriority Unsecured Claims
\.	Sta	ate ZIP Code	Last 4 digits of account number
City			On which entry in Part 1 or Part 2 did you list the original creditor?
lame			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured
		A A A A A A A A A A A A A A A A A A A	Claims
City	Ste	ate ZIP Code	Last 4 digits of account number
	andress served \$7 \$7000000000000000000000000000000000		On which entry in Part 1 or Part 2 did you list the original creditor?
łame			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Part 2: Creditors with Nonpriority Unsecured
	- MANAGEMENT - WASHINGTON - TO THE	4	Claims
City	Sta	ate ZIP Code	Last 4 digits of account number
Jama.			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Ştreet		☐ Part 2: Creditors with Nonpriority Unsecured Claims
	AMAZIAN AMAZIA		Last 4 digits of account number
City	\$t; масческие изменяемие выполнение по ответительного учете стацион остановае вом со от самонивает очетовает измен масческие изменяемие вом в технология	ate ZIP Code	
Name	AND THE STREET OF THE STREET O		On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account number
City		ate ZIP Code	Last 4 didits of account humber

Case 24-10257-mdc Doc 17 Meiled 02/27/24 Entered 02/27/24 15:43:42 Desc Main Fist Name Middle Name Last Name Document Page 20 of 32 pumber (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the a	amounts of certain types of unsecured claims. This information mounts for each type of unsecured claim.	ation is for statistical reporting purposes only. 28 U.S.C. § 159.
		Total claim
Total claims	6a. Domestic support obligations	6a. _{\$}
from Part 1	6b. Taxes and certain other debts you owe the government	6b. _{\$}
	6c. Claims for death or personal injury while you were intoxicated	6c.
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + _{\$}
	6e. Total. Add lines 6a through 6d.	6e. \$
		Total claim
Total claims	6f. Student loans	6f. \$
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i. + \$
	6j. Total. Add lines 6f through 6i.	6j. \$

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Document Page 21 of 32

Fill in this in	formation to ide	entify your case:		
Debtor	Bonnie	Lynn	MacDonald	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse If filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: Eastern District of	Pennsylvania	lacksquare
Case number	24-10257-m	dc		
(If known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with	h whom you	nave the contract or lease	State what the contract or lease is for
2.1					
	Name	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			·
	Number	Street			
22.7797	City		State	ZIP Code	
2.2	Name		w		
	Number	Street			
		Street		710.0	
2.3	City		State	ZIP Code Conference of the co	
	Name				
	Number	Street			
enung ang	City		State	ZIP Code Section of the control of	
2.4	Name	A CONTRACT OF THE CONTRACT OF		and the second s	
	Number	Street	· · · · · · · · · · · · · · · · · · ·		
***************************************		Stieet	State	ZIP Code	<u> </u>
2.5	City	n en		E.IF VUILE SERVICION EN ANTE ESCUENCIA PROPORTA E ELEMENTA DE SERVICIO ESCUENCIA PARTICIA DI CONTROLLA PROPORTA ELEMENTA DE SERVICIO DE CONTROLLA PROPORTA DE CONTROLLA PROPORT	
	Name			, Mary , Mary	
***************************************	Number	Street			
	City		State	ZIP Code	en e

Document Page 22 of 32
MacDonald Case nu

Bonnie Lynn

Debtor 1

First Name

Case number (if known) 24-10257-mdc

	A	iditional P	age if You Ha	ve More Co	ntracts or Leases	
	Person o	company \	vith whom you l	nave the con	tract or lease	What the contract or lease is for
2 <u>2</u>						
	Name					
	Number	Street	•••			-
	City		State	ZIP Code		-
2			muun maanaalik kirinti 440 mulliiki Pelaina Soodi Sii Sii Akkeet Talkeet Soo	ing and an angular section of the contract of		
	Name	*****				-
	Number	Street	···			
	City		State	ZIP Code	and the state of t	-
2					स्तरप्रकृतिक के शिष्युं के शुरू के श्रम्भ के स्वतिकार के स्वतिकार के स्वतिकार के स्वतिकार के स्वतिकार के स्वतिक स्वतिकार के स्वतिकार के स्	
	Name				911976676100	-
	Number	Street				
	City		State	ZIP Code		-
2	entropies and a respective state of the selection of the					
	Name	1				- - -
	Number	Street			- MANAGEMENTON CV	-
	City	W	State	ZIP Code		-
2						
	Name					.
	Number	Street				- -
	City	www.nun	State	ZIP Code		-
2						
	Name					-
	Number	Street				-
	City		State	ZIP Code	- American	_
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	Name					-
	Number	Street				_
	City		State	ZIP Code		-
2		r generale mention (Sell-Hall) Partie (Sell-Hall)	ograficija, in sije spiezu u u u u u u u u u u u u u u u u u u	a entra processor estrutura en processor promision en cilitàrista estreta en companya en processor de la compa	e geographic de de la primeira de la manera de la companya del companya de la companya de la companya del companya de la companya del la companya de la companya de la com	**************************************
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-	Number	Street	WWHO			-
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Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Document Page 23 of 32

Fill in this in	formation to ide	entify your case:	
Debtor 1	Bonnie	Lynл Middie Name	Mac Donald Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court fo	or the: KASTERN Distric	et of R
Case number (If known)	24-11	0257-mcd	

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	you have any codebtors? (If you are filing	a joint case, do not il	st eitner spouse	as a codebior.)
	Yes			
W Ar	ithin the last 8 years, have you lived in a c izona, California, Idaho, Louisiana, Nevada,	ommunity property New Mexico, Puerto	state or territor Rico, Texas, Wa	y? (Community property states and territories include shington, and Wisconsin.)
	No. Go to line 3. Yes. Did your spouse, former spouse, or le	gal equivalent live wi	th you at the time	e?
	☐ No☐ Yes. In which community state or territo	ory did you live?		Fill in the name and current address of that person.
	Name of your spouse, former spouse, or legal equi	ivalent		_
	Number Street			_
	City Sta	ate	ZIP Code	
sl S	nown in line 2 again as a codebtor only if t	that person is a gua <i>E/F</i> (Official Form 1	rantor or cosig	tor if your spouse is filing with you. List the person ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D,
si Si	nown in line 2 again as a codebtor only if t chedule D (Official Form 106D), <i>Schedule</i>	that person is a gua <i>E/F</i> (Official Form 1	rantor or cosig	ner. Make sure you have listed the creditor on
sl S	nown in line 2 again as a codebtor only if t chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Colu	that person is a gua <i>E/F</i> (Official Form 1	rantor or cosig	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply:
si S	nown in line 2 again as a codebtor only if t chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Colu	that person is a gua <i>E/F</i> (Official Form 1	rantor or cosig	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the
si S	nown in line 2 again as a codebtor only if t chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Colu Column 1: Your codebtor	that person is a gua <i>E/F</i> (Official Form 1	rantor or cosig	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line
si S	nown in line 2 again as a codebtor only if to chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Coluctor Column 1: Your codebtor	that person is a gua <i>E/F</i> (Official Form 1	rantor or cosig	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line
sl s	nown in line 2 again as a codebtor only if to chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Coluction 1: Your codebtor Name Number Street	that person is a gua E/F (Official Form 1 Imn 2.	rantor or cosigi 06E/F), or <i>Sche</i>	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
si S	nown in line 2 again as a codebtor only if to chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Coluction 1: Your codebtor Name Number Street	that person is a gua E/F (Official Form 1 Imn 2.	rantor or cosigi 06E/F), or <i>Sche</i>	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line
si S	nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Coluctor Column 1: Your codebtor Name Number Street City	that person is a gua E/F (Official Form 1 Imn 2.	rantor or cosigi 06E/F), or <i>Sche</i>	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
sl s	nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Coluctor Column 1: Your codebtor Name Number Street City	that person is a gua E/F (Official Form 1 Imn 2.	rantor or cosigi 06E/F), or <i>Sche</i>	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line
st s	nown in line 2 again as a codebtor only if to chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Coluction 1: Your codebtor Name Number Street Number Street City City	that person is a gua E/F (Official Form 1 Imn 2.	rantor or cosigi 06E/F), or Sche ZIP Code	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line
st s	nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Coluctor Column 1: Your codebtor Name Number Street Number Street	that person is a gua E/F (Official Form 1 Imn 2.	rantor or cosigi 06E/F), or Sche ZIP Code	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line
si S	nown in line 2 again as a codebtor only if to chedule D (Official Form 106D), Schedule chedule E/F, or Schedule G to fill out Coluction 1: Your codebtor Name Number Street Number Street City City	that person is a gua E/F (Official Form 1 Imn 2.	rantor or cosigi 06E/F), or Sche ZIP Code	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Document Page 24 of 32

Debtor 1

2	١.	1	
ÓσΛηι	12	1~Y	74
First Name		Middle N	ame

MacDonald Last Name

Case number (if known)

24-10257-mid

	Ad	Iditional Page to List	More Codebtors		·
(Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3					Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
	Ol.		State	ZIP Code	
3	City			<u> </u>	
	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City	,	State	ZIP Code	
3					Schedule D, line
Ш	Name				Schedule E/F, line
					— Schedule G, line
	Number	Street			Griedule G, line
	City		State	ZIP Code	
3					Schedule D, line
	Name				Schedule E/F, line
i					Schedule G, line
	Number	Street			a scribulo e, into
ļ 	City		State	ZIP Code	
3					Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
				7ID Code	<u>.</u>
3	City		State	ZIP Code	
لتا	Name				Schedule D, line
	,141110				Schedule E/F, line
	Number	Street	-		— Schedule G, line
	City		State	ZIP Code	
3.					Cl. Cultivatuda D. Bras
디	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
3					Schedule D, line
C. T. C.	Name				Schedule E/F, line
					Schedule G, line
	Number	Street			Goriedate G, little
	City		State State State	ZIP Code	apply and the control of the control

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Document Page 25 of 32

Fill in this ir	nformation to identify	your case:				
Debtor 1	Bonnie	Lynn N	MacDonald			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the: I	Eastern District of Pennsyl	Ivania <u> </u>			
Case number	24-10257-mdc			Che	eck if this is:	
(ii Miowii)					An amended filing	
					A supplement showing postpetition income as of the following date:	chapter 13
Official Fo	orm 106I				MM / DD / YYYY	
Sched	lule I: You	ır Income				12/15
			anle are filing ton	othor (Dobtor 1 and	I Debtor 2), both are equally responsi	
supplying co If you are sep separate she	rrect information. If your arated and your spou	ou are married and not fi ise is not filing with you top of any additional pa	iling jointly, and yo , do not include int	our spouse is living formation about yo	with you, include information about ur spouse. If more space is needed, a per (if known). Answer every question	your spouse. attach a
Fill in you information	ır employment on.		Debtor 1		Debtor 2 or non-filing spo	use
attach a s	e more than one job, eparate page with n about additional s.	Employment status	☑ Employed ☐ Not employ	ved	☐ Employed ☐ Not employed	
Include pa	art-time, seasonal, or byed work.		ъ.			
Occupatio	n may include student aker, if it applies.	Occupation	Driver			
		Employer's name	LYFT			
		Employer's address	185 Berry St	reet #5000		
			Number Street		Number Street	
				salvas nove in		
			San Franciso	co CA 94	107	
			City	State ZIP Code	City State	ZIP Code
		How long employed th	ere? 6 YRS 8 N	MOS.	6 YRS 8 MOS.	
Part 2:	Give Details About	Monthly Income				
	monthly income as of		rm. If you have noth	ing to report for any	line, write \$0 in the space. Include your	non-filing
If you or y	our non-filing spouse ha			ormation for all emp	oyers for that person on the lines	
				For Debt	or 1 For Debtor 2 or non-filing spouse	
		ary, and commissions (l calculate what the month		2. \$_3,600	0.00 \$	
3. Estimate	and list monthly ove	rtime pay.		3. +\$	+ \$	
4. Calculat	e gross income. Add li	ine 2 + line 3.		4. \$ 3,600	3.00	
1						

Entered 02/27/24 15:43:42 Case 24-10257-mdc Doc 17 Filed 02/27/24

Document MacDonald

Last Name

Bonnie

First Name

Debtor 1

Page 26 of 32

Case number (if known)

24-10257-mdc

Desc Main

For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here..... 5. List all payroll deductions: 5a. 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. 5c. 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. 5e. 5e. Insurance 5f. 5f. Domestic support obligations 5g. 5g. Union dues 5h. 5h. Other deductions. Specify: _ 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 3,600.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 8a monthly net income. 8b. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 8c. settlement, and property settlement. Bd. 8d. Unemployment compensation 1,693.00 8e. 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 8g. 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. 1,693.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 10. Calculate monthly income. Add line 7 + line 9. 5.543.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. **+** Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 5.543.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Just started a new job as an insurance agent for Lincoln Heritage selling Final Expense Insurance Yes. Explain: (Funeral Insurance)

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Document Page 27 of 32

Fill in this information to identify y	your case:			
Debtor 1 Bonnie First Name	Lynn MacDonald Middle Name Last Name	Check if this	s is:	
Debtor 2		——— An amer		
(Spouse, if filing) First Name	Middle Name Last Name	☐ A supple	ment showing postp	
United States Bankruptcy Court for the: E Case number 24-10257-mdc	astern district of Pennsylvania		s as of the following	date:
Case number 24-10257-mdc (If known)		MM / DD	/ YYYY	
Official Form 106J				
Schedule J: You	ur Expenses			12/15
Be as complete and accurate as po information. If more space is neede (if known). Answer every question.	essible. If two married people are filired, attach another sheet to this form.	ng together, both are equally re On the top of any additional pa	sponsible for supplyi ages, write your name	ing correct e and case number
Part 1: Describe Your Hou	sehold	MATERIAL TO THE PARTY OF THE PA		
. Is this a joint case?) American
No. Go to line 2. Yes. Does Debtor 2 live in a s	eparate household?			
☐ No☐ Yes. Debtor 2 must file	e Official Form 106J-2, <i>Expenses for S</i> o	eparate Household of Debtor 2.		
2. Do you have dependents?	☑ No	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents'				□ No □ Yes
names.				□ No
			· · · · · · · · · · · · · · · · · · ·	Yes
				☐ No ☐ Yes
				□ No
				☐ Yes
		Company of the state of the sta		□ No □ Yes
				· u res
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes		a and annual shalloid difference on the state of the stat	
Part 2: Estimate Your Ongoi	ing Monthly Expenses			
	bankruptcy filing date unless you a			
expenses as of a date after the ban applicable date.	nkruptcy is filed. If this is a suppleme	ental <i>Schedule J</i> , check the box	at the top of the forr	n and fill in the
	n-cash government assistance if you d it on Sc <i>hedule I: Your Incom</i> e (Offi		Your expe	nses
	expenses for your residence. Include		4. \$	3,228.87
If not included in line 4:				
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or r	enter's insurance		4b. \$	
4c. Home maintenance, repair,	and upkeep expenses		4c. \$	
4d. Homeowner's association of	r condominium dues		4d. \$	

Debtor 1

Bonnie First Name Lynn

MacDonald

Case number (If known) 24-10257-mdc

		Your exp	enses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	110.00
6b. Water, sewer, garbage collection	6b.	\$	100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	215.00
6d. Other. Specify:	6d.	\$	
7. Food and housekeeping supplies	7.	\$	250.00
8. Childcare and children's education costs	8.	\$	
9. Clothing, laundry, and dry cleaning	9.	\$	25.00
10. Personal care products and services	10.	\$	
11. Medical and dental expenses	11.	\$	
12. Transportation. Include gas, maintenance, bus or train fare.		¢	350.00
Do not include car payments.	12.	Ψ	
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
14. Charitable contributions and religious donations	14.	\$	
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 			
15a. Life insurance	15a.	\$	165.00
15b. Health insurance	15b.	\$	
15c. Vehicle insurance	15c.	\$	150.00
15d. Other insurance. Specify:	15d.	\$	
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	542.79
17b. Car payments for Vehicle 2	17b.	\$	
17c. Other. Specify:	17c.	\$	
17d. Other. Specify:	17d.	\$	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	
19. Other payments you make to support others who do not live with you.			
Specify:	19.	\$	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	me.		
20a. Mortgages on other property	20a.	\$	
20b. Real estate taxes	20b.	\$	
20c. Property, homeowner's, or renter's insurance	20c.	\$	25.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	
20e. Homeowner's association or condominium dues	20e.	\$	

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Document Page 29 of 32

Debtor 1		Bonnie	Lynn	MacDonald		Case number (if known) 24-10257-mdc				
		First Name	Middle Name	Last Name						
21.	Other. S	pecify:						21.	+\$	
	0-11-4									
22.	Calculat	e your mont	hly expenses.							
	22a. Add	l lines 4 throu	ıgh 21.					22a.	\$	5,161.66
	22b. Cop	y line 22 (mo	onthly expenses for De	ebtor 2), if a	ny, from Official Forn	n 106J-2		22b.	\$	
	22c. Add	l line 22a and	I 22b. The result is you	ur monthly e	xpenses.			22c.	\$	5,161.66
23. (Calculate	your month	nly net income.							5,543.00
2	23a. Co _l	py line 12 (<i>y</i> d	our combined monthly	income) from	m <i>Schedule I</i> .			23a.	\$	5,543.00
2	23b. Co	py your mont	hly expenses from line	e 22c above				23b.	-\$	5,161.66
2	23c. Sul	btract your m	onthly expenses from	your month	y income.					391.34
	The	e result is you	ır monthly net income					23c.	\$	001.04
E										
24.	Do you e	xpect an inc	rease or decrease in	ı your expe	nses within the yea	ır after you f	ile this form?			
	For exam	ple, do you e	expect to finish paying	for your car	loan within the year	or do you ex	pect your			
	mortgage	payment to	increase or decrease	because of	a modification to the	terms of your	r mortgage?			
١	☐ No.	g compressed and contains a second contains								
l	Yes.	Explain h	_{ere:} My plan is to p	oay off my	car ASAP and I	am workir	ng to get a mo	difica	tion on my	mortgage.

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Document Page 30 of 32

Fill in this information to identify	your case:			
Debtor 1 Bonnie	Lynn MacDonald	2		
First Name	Middle Name Last Name	Check if this		
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	——— An ame	_	- stition objector 12
United States Bankruptcy Court for the:	Eastern District of Pennsylvania		ement showing postress as of the following	
Case number 24-10257-mdc		MM / DD	/ YYYY	
(If known)				
Official Form 106J	_			
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as p	ossible. If two married people are fili ed, attach another sheet to this form	ng together, both are equally re . On the top of any additional p	esponsible for supply ages, write your nam	ing correct e and case number
Part 1: Describe Your Hot	usehold			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?			
□ No	. 0%:15 . 40010 5	and the second of Dahlan O		
	le Official Form 106J-2, Expenses for S	eparate nouseriold of Deblor 2.		
Do you have dependents? Do not list Debtor 1 and	No Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2. Do not state the dependents'	each dependent	Section Control (Control (Cont		☐ No
names.				Yes
				U No □ Yes
				☐ No
				☐ Yes
				☐ No
				Yes
				☐ No ☐ Yes
Do your expenses include expenses of people other than	☑ No ☐ Yes			
yourself and your dependents?				resolvent of the properties as in the section of the section of a section of the
	ing Monthly Expenses			
expenses as of a date after the ba	r bankruptcy filing date unless you a nkruptcy is filed. If this is a supplem			
applicable date.	n-cash government assistance if you	ı know the value of		
	d it on Schedule I: Your Income (Off		Your expe	nses
The rental or home ownership any rent for the ground or lot.	expenses for your residence. Include	e first mortgage payments and	4. \$	3,228.87
If not included in line 4:				
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or	renter's insurance		4b. \$	
4c. Home maintenance, repair	, and upkeep expenses		4c. \$	
4d. Homeowner's association	or condominium dues		4d. \$	

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Document Page 31 of 32

Debtor 1

Bonnie First Name Lynn

MacDonald

Case number (if known) 24-10257-mdc

		Your expe	nses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	110.00
6b. Water, sewer, garbage collection	6b.	\$	100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	215.00
6d. Other. Specify:	6d.	_	
7. Food and housekeeping supplies	7.	\$	250.00
8. Childcare and children's education costs	8.	\$	
9. Clothing, laundry, and dry cleaning	9.	\$	25.00
10. Personal care products and services	10.	\$	
11. Medical and dental expenses	11,	\$	
12. Transportation . Include gas, maintenance, bus or train fare.			250.00
Do not include car payments.	12.	\$	350.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
14. Charitable contributions and religious donations	14.	\$	
15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	165.00
15b. Health insurance	15b.	\$	
15c. Vehicle insurance	15c.	\$	150.00
15d. Other insurance. Specify:	15d.	\$	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	542.79
17b. Car payments for Vehicle 2	17b.	\$	
17c. Other. Specify:	17c.	\$	
17d. Other. Specify:	17d.		
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	
19. Other payments you make to support others who do not live with you.			
Specify:	19.	\$	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.		
20a. Mortgages on other property	20a.	\$	
20b. Real estate taxes	20b.	\$	
20c. Property, homeowner's, or renter's insurance	20c.	\$	25.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	· · · · · · · · · · · · · · · · · · ·
20e. Homeowner's association or condominium dues	20e.	\$	

Case 24-10257-mdc Doc 17 Filed 02/27/24 Entered 02/27/24 15:43:42 Desc Main Document Page 32 of 32

Debtor 1	Bonnie	Lynn	MacDonald	Case number (if known)_2	24-10257	-mdc
	First Name	Middle Name Last Nar	ne			
21. Other. S	Specify:			2	21. +\$	
22. Calculat	e your mont	hly expenses.				
22a. Add	l lines 4 throu	gh 21.		22	a. \$	5,161.66
22b. Cop	y line 22 (mo	nthly expenses for Debtor	2), if any, from Official Form 10)6J-2 22	b. \$	
22c. Add	I line 22a and	22b. The result is your mo	nthly expenses.	22	c. \$	5,161.66
23. Calculate	your month	ly net income.			•	5,543.00
23a. Co	py line 12 (<i>yo</i>	ur combined monthly incom	ne) from Schedule I.	23	sa. \$	0,040.00
23b. Co	py your month	nly expenses from line 22c	above.	23	3b\$	5,161.66
23c. Sub	btract your mo	onthly expenses from your	monthly income.		•	391.34
The	e result is you	r monthly net income.		23	3c. — —	
		_	r expenses within the year at	-		
	•		use of a modification to the terr			
☐ No.						
😡 Yes.	Explain he	_{re:} My plan is to pay o	off my car ASAP and I ar	n working to get a modifi	cation or	າ my mortgage.